WEST NILE VIRUS SUMMARY REPORT 2012 SEASON UTAH DEPARTMENT OF HEALTH

Report Purpose

The purpose of this document is to provide Utah West Nile virus (WNV) partners a concise summary of this season's major results. Information displayed in this report has been compiled by the Utah Department of Health (UDOH), but reflects information obtained from concerted joint efforts. All activities related to WNV during the 2012 season involved major contributions from many different agencies. These include as follows: blood banks of Utah, local health departments (LHDs), Utah Department of Agriculture and Food (UDAF), Utah Division of Wildlife Resources (UDWR), Utah Mosquito Abatement Association (UMAA), the Unified State Laboratories: Public Health (USL:PH), and the Utah Veterinary Diagnostic Laboratory (UVDL). In addition to the direct contribution of surveillance data, these agencies were also involved in systematic planning and preparation for the 2012 season. The intent of this report is to document the results of the efforts put forth by these entities during the 2012 WNV season.

Note: The purpose of this report is to describe general trends that occurred during the 2012 season. Specific surveillance counts may be subject to change as data continues to be reconciled for the season.

Introduction to WNV

During the summer of 2012, WNV reemerged in Utah. This was the tenth year WNV activity was detected in Utah. WNV is a disease transmitted by mosquitoes. Birds are the natural hosts of the disease with humans and horses serving as accidental hosts. The majority of people infected with WNV never develop symptoms. A small percentage of infected individuals will display West Nile fever symptoms (i.e. fever, headache, and body aches). A more serious form of the disease, West Nile neuroinvasive illness, may also occur when the virus infects the central nervous system. People with this form of the disease will have high fevers, severe headaches, neck stiffness, and mental confusion. Hospitalization may be required and death is possible.

Introduction to WNV Surveillance in Utah

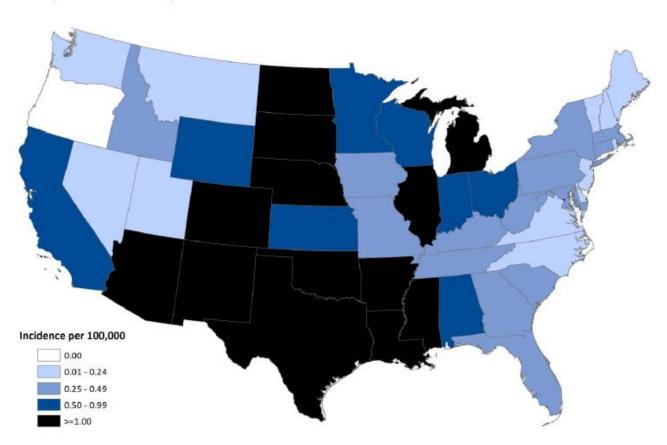
Surveillance for WNV activity involves several different components. Since the disease is zoonotic in nature, both human and animal surveillance occurs. In past years, WNV surveillance in Utah involved human, mosquito, wild bird, horse, and sentinel chicken populations. Due to the involvement of these different populations, surveillance efforts this season enlisted the expertise and abilities of many different agencies. Budget constraints again limited surveillance for the 2012 season, and in order to keep more critical surveillance running, wild bird testing, sentinel chicken testing and official coordinated equine testing efforts at UDAF were again eliminated from routine surveillance. Local mosquito abatement districts (MADs), in conjunction with the UMAA, performed necessary trapping and identification for mosquito surveillance. Confirmation of these mosquitoes occurred at the USL:PH. Major health care providers submitted human samples across the state with testing occurring at both the USL:PH and private laboratories such as ARUP (Associated Regional and University Pathologists). The three major blood banks servicing Utah (American Red Cross, ARUP, and Mountain Star) coordinated screening of donated blood for

identification of viremic donors. All LHDs in Utah were involved with disseminating, investigating, and responding to surveillance data indicative of local WNV activity.

2012 Season National Highlights

West Nile virus neuroinvasive disease incidence maps present data reported by state and local health departments to CDC's ArboNET surveillance system. Figure 1 shows the incidence of human neuroinvasive disease (e.g., meningitis, encephalitis, or acute flaccid paralysis) by state for 2012 ranging from 0.01-0.24, 0.25-0.49, 0.50-0.99, and greater than 1.00 per 100,000 population.

Figure 1
West Nile virus neuroinvasive disease incidence reported to ArboNET, by state, United States, 2012



Neuroinvasive disease cases were reported to ArboNET from the following states in 2012: Alabama, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, and Wyoming.

For 2012, of the 5,674 human cases reported to CDC, 2,873 (51%) were reported as West Nile meningitis or encephalitis (neuroinvasive disease), and 2,801 (49%) were reported as West Nile fever (milder disease). A total of 286 cases were fatal in 2012. These numbers are significantly higher in 2012 than 2011, as the total case count in 2011 was 667 human cases, with 42 fatalities.

2012 Season Utah Highlights

Activity during the 2012 WNV season in Utah was similar to what was detected during the 2011 season. The geographic spread of both human and animal activity was fairly evenly distributed throughout the state, though the highest concentration of activity overall was focused in the southern portion of the state. A total of eight counties had activity detected during the 2012 season compared with six counties in 2011. For 2012, all RAMP tests for mosquitoes were confirmed by PCR at USL:PH.

Table 1: WNV activity, Utah 2012 (positive counts only)

Total West Nile Virus Positive Samples: Utah 2012										
County of Residence	Human	Chicken*	Horse	Mosquito	Total					
Beaver										
Box Elder	2		2	4	8					
Cache		1			1					
Carbon										
Daggett										
Davis				1	1					
Duchesne										
Emery										
Garfield										
Grand										
Iron										
Juab										
Kane										
Millard										
Morgan										
Piute										
Rich										
Salt Lake				1	1					
San Juan										
Sevier										
Summit	1				1					
Tooele										
Uintah										
Utah				2	2					
Wasatch										
Washington	1		1	13	15					
Wayne										
Weber	1				1					
State Total	5	1	3	21	30					

Human Cases of West Nile Virus: Utah 2012											
Age Group	Total	Total % Total Fever Death Neuroinvasive									
<18 yrs											
18-39 yrs	1	20%	1								
40-64 yrs											
≥65 yrs	4	80%	1	1	3						
State Total	5	100%	2	1	3						

^{*}The state is not conducting sentinel chicken surveillance in 2012. However, some counties still maintain sentinel chicken flocks.

Past Season Comparison

2003 was the first year WNV activity was established in Utah. Similar to many initial seasons in other states, activity was muted. One human case was reported for the 2003 season in Utah, in addition to one viremic donor who did not develop symptoms. Horse activity was the main indication of WNV presence in 2003. 2004 was the first year WNV activity was established in northern Utah along the Wasatch Front. The majority of activity for 2004 occurred in extreme southern and eastern areas of Utah, such as Washington and Grand counties. During 2005, activity expanded into more northern regions of the state and Utah and Uintah counties served as focal points for detected activity. The 2006 season was the most active season. Activity was focused along the Wasatch Front in the more populated areas, Salt Lake County and Utah County. With an increase in activity, there was also an increase in fatalities, with Utah experiencing five. 2007 started the decline in the number of cases, as well as a decrease in the number of fatalities. 2007 also showed that the virus was moving into the more northern parts of the state, with the bulk of cases being in Cache and Box Elder counties. Activity during the 2008 WNV season decreased compared to activity detected during the 2007 season. The 2009 - 2011 seasons saw an even more dramatic decrease in the level of activity. Due to inconsistencies with RAMP testing, it was decided that mosquito pools would only be counted if they were confirmed by PCR. This led to a decrease in the number of positive mosquito pools detected throughout the state. The southwestern portion of Utah saw the most animal (mosquito) activity for the 2010, 2011 and 2012 seasons.

Table 2: WNV season comparison, Utah 2003-2012

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Human	1	11	52	158	70	27	2	2	3	5
Horse	35	5	68	59	18	8	6	3	1	3
Bird*	2	8	22	76	19	3	0	0	0	0
Chicken*	9	32	79	107	74	16	1	1	0	1
Mosquito Pools	3	181	80	466	225	140	284	31	23	21
Counties with Detection	9	11	17	19	19	14	12	5	6	8

^{*}Wild bird and sentinel chickens were not part of Utah's active surveillance in 2011-2012.

2012 Utah Activity Timeline

The majority of surveillance measures began in June 2012. West Nile virus activity was detected the week of July 14, 2012 in one mosquito pool, confirmed by PCR, from Washington County. Activity was detected from July through October, with WNV activity being detected in most surveillance measures (horse, mosquito) by August. Utah's first human case was reported July 14, 2012. Human, mosquito and equine cases continued to be reported into October. All active surveillance for the 2012 season had ceased by the end of October. However, testing of suspect human and horse cases continues year-round.

Human Surveillance

Human surveillance occurs primarily through reporting of results indicative of acute infection from major laboratories. LHDs were immediately notified in these instances for the initiation of case investigations. Due to issues with testing kits from a major reference laboratory from the 2008 season, it was again determined that all human samples would be confirmed at USL:PH. Additionally, major blood banks servicing Utah screened donations for the presence of WNV.

The total Utah human case count for the 2012 season currently stands at five identified cases.

There were no individuals identified as being infected with WNV through blood donation screening.

Table 3: WNV clinical comparison of human cases, United States vs. Utah, 2012

	Utah	United States
Case Number	5	5,674
Fatalities	1	286
Percent Fatalities	20%	5%
Percent Neuroinvasive Disease	60%	51%

Table 4: WNV, clinical and demographic comparison of human cases, Utah 2003-2012

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
Case Number	1	11	52	158	70	28	2	2	3	5
Fatalities	0	0	1	5	2	0	0	0	0	1
Percent Male	100%	45%	54%	51%	51%	79%	50%	100%	66%	60%
Median	47	53	43	47	50	41	50	66	35	70
Age	years									
Age	NA	5-80	6-86	1-88	3-89	4-79	57-44	54-78	24-68	22-87
Range	IVA	years								

Table 5: WNV clinical and demographic characteristics by age group, Utah 2012

	< 18 years	18-39 years	40-64 years	≥ 65 years
Case Number	0	1	0	4
Fatalities	0	0	0	1
Neuroinvasive # (%)	0	0	0	3 (60%)
Hospitalized # (%)	0	1 (20%)	0	4 (80%)
Male # (%)	0	1 (20%)	0	2 (40%)

Figure 2 represents human and mosquito pool positivity over time. The first activity for 2012 was detected in both mosquitoes and one human during the week July 14, 2012. This human case originally tested as "non-specific" at USL:PH and had to be sent to CDC for confirmation. That confirmation took place on August 1, 2012. Utah has had its first human fatality with an onset the last week of September.

Figure 2

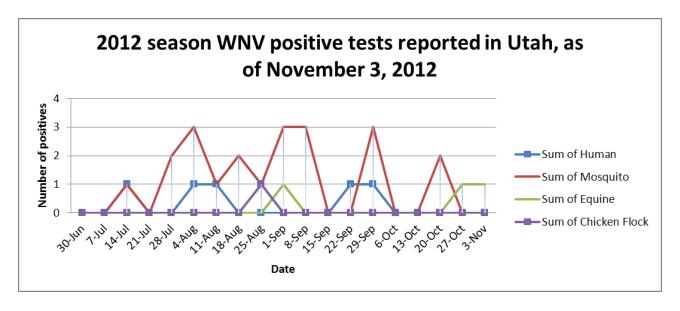


Table 6 compares Utah to surrounding states. Although many states were seeing increased activity, Utah experienced only five human cases with one fatality.

Table 6

Utah compared to surrounding states, as reported to CDC ArboNet, as of October 30, 2012										
	Neuroinvasive disease cases		Non-neuroinvasive disease cases		Total cases		Deaths			
		Rate per 100,000	Rate per 100,000			Rate per 100,000		Rate per 100,000		
State	Case Count	person years	Case Count	person vears	Case Count	person vears	Case Count	person years		
Arizona	73	1.13	36	0.56	109	1.68	3	0.05		
Colorado	59	1.15	68	1.33	127	2.48	3	0.06		
Idaho	4	0.25	11	0.69	15	0.95	0	0.00		
Montana	0	0.00	5	0.50	5	0.50	0	0.00		
New Mexico	20	0.96	19	0.91	39	1.87	1	0.05		
Utah	3	0.11	2	0.07	5	0.18	1	0.04		
Wyoming	3	0.53	4	0.70	7	1.23	0	0.00		

Mosquito Surveillance

Personnel from mosquito abatement districts across the state performed the primary functions of trapping mosquitoes at various locations in their district. Trapped mosquitoes were identified and sorted into "pools" based on species. Each mosquito pool contained 50-100 individual mosquitoes. These pools were shipped to the USL:PH for testing by PCR.

Horse surveillance

Surveillance of equine disease related to WNV infection was again coordinated by the UDAF. Veterinarians across the state were encouraged to submit samples from suspect equine cases to the UVDL-Logan for testing. Results of these serum tests were reported by the UDAF to the UDOH with appropriate notification occurring for positive cases. The majority of samples submitted for testing were from domestic, privately owned horses with symptoms indicative of infection and no history of vaccination. Disease awareness among veterinarians and horse owners was accomplished through distribution of pamphlets and periodic updates using the Utah Veterinary Alert Listserver.

Wild bird surveillance

Due to budget constraints, wild bird surveillance was discontinued for the 2012 season.

Sentinel chicken surveillance

Due to budget constraints, sentinel chicken surveillance was discontinued for the 2012 season.

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